

## THE UNDER SECRETARY OF VETERANS AFFAIRS FOR BENEFITS WASHINGTON, D.C. 20420

SEP 1 3 2006

The Honorable Lane Evans Ranking Democratic Member Committee on Veterans' Affairs U.S. House of Representatives Washington, DC 20515

Dear Congressman Evans:

I am responding to your request for revision of 38 CFR 3.309(d) to include a presumption of service connection for all cancers in veterans exposed to ionizing radiation.

You and your colleagues based your request on two findings from the National Academies report, <u>Health Risks from Exposure to Low Levels of Ionizing Radiation</u> <u>BEIR VII Phase 2</u> (Washington, DC: The National Academies Press, 2006), at pages 10 and 15.

In one finding, the report stated it is unlikely that a threshold exists for the induction of cancers. However, it went on to state that the occurrence of radiation-induced cancers at low doses would be small. The report provided as an example a cohort of 100 individuals exposed to 100 mSv (equivalent to 10 rem) of radiation. In this cohort, one individual would be diagnosed with cancer resulting from radiation exposure. However, 42 individuals would be diagnosed with cancer that is unrelated to radiation exposure.

The Defense Threat Reduction Agency indicates that over 95 percent of veterans who participated in the occupation of Hiroshima and Nagasaki received less than 1 rem of radiation exposure. Over 99 percent of the participants in atmospheric nuclear weapons testing received whole body doses that were less than 5 rem.

In another finding, the report stated that the current scientific evidence is consistent with the hypothesis that there is a linear, no-threshold (LNT) dose-response relationship between exposure to ionizing radiation and the development of cancer in humans.

The LNT concept can be interpreted as indicating that the risk from a low dose of radiation will be proportionately small compared to a high radiation dose. In addition, the straight-line exposure scenario does not fit all circumstances. Some cancers are not considered radiogenic, some are only induced after huge therapeutic radiation doses, and the risk of some cancers exists only when exposure occurs during childhood or adolescence.

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For these reasons, I cannot recommend a revision of 38 CFR 3.309(d) to include a presumption of service connection for all cancers.

As always, I appreciate your interest in our Nation's veterans. A similar response has been sent to the other co-signers of the letter.

Sincerely yours,

Daniel L Cooper